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CLAIMS AS FILED - PART I (Column 1) (Column 2)								LL ENTIT	Υ		ОТН	ER THAN
OTAL CLAIMS		1			100/01/11/2/		TYPE		EE	OR 	SMA	LL ENTITY
OR		NŅM	NUMBER FILED		NUMBER EXTRA		BASIC			OB	BASIC F	
OTAL CHARGEABLE CLAIMS		is 2	Platinus 20=				X\$	9=	_	OR	X\$18:	<del>-   -</del>
DEPENDENT CLAIMS		14	4inus 3 =		•		X42=		$\dashv$	1 7		-
LTIPLE DE	PENDENT CLAI	M PRESENT	RESENT				<b> </b>	+-	$\neg$	OR	<u>.</u>	<del></del>
he differe	nce in column 1	Is less than	zero, enter	<b>"0" I</b> n	column 2	+140 TOTA			OR	+280=	1	
	CLAIMS AS	AMEND	ED - PART	T 11			1017	" <u> </u>	<b></b> '	OR	TOTAL	RTHAN
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	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FOR	R SLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		F	ATE	ADDI- TIONAL
tal	•	Minus	44		e`		X\$ 9=	1	OR	X	\$18=	FEE
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AST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR			
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ST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X42=		OR	X8	4=	
ntry in colum	n 1 is less than the	ntry in colum	in 2. write 10° in	colum	n.3	L	140=		OR	+28	0=	
Highest Num	ber Previously Pak	For in this	SPACE is less (	than 20	o, nter "20."	ADD	TOTAL OT, FEE		OR A	DOLL	FEE	
Anest Many	er Previously Paid	For (Total or l	ndependent) is	tn hig	hest number fo	und (	n the appr	opriate box	in colu	mn 1.		7